B 6 Summary (Official Form 6 - Summary) (12/13)

United States Bankruptcy Court Middle District of Florida

In re	Elizabeth Poole		Case No.	6:14-bk-07839
		Debtor	.,	
			Chapter	13

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	149,964.00		
B - Personal Property	Yes	4	31,185.73		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	2		188,012.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	2		35,031.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			3,368.49
J - Current Expenditures of Individual Debtor(s)	Yes	2			2,574.95
Total Number of Sheets of ALL Schedu	ıles	17			
	To	otal Assets	181,149.73		
		1	Total Liabilities	223,043.00	

B 6 Summary (Official Form 6 - Summary) (12/13)

United States Bankruptcy Court Middle District of Florida

In re	Elizabeth Poole		Case No	6:14-bk-07839
		Debtor ,		
			Chapter	13

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	0.00

State the following:

Average Income (from Schedule I, Line 12)	3,368.49
Average Expenses (from Schedule J, Line 22)	2,574.95
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	1,409.38

State the following:

		_
Total from Schedule D, "UNSECURED PORTION, IF ANY" column		11,795.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		35,031.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		46,826.00

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B6A (Official Form 6A) (12/07)

In re	Elizabeth Poole		Case No.	6:14-bk-07839
_		Debtor,		

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Location: 741 Brenchner Terrace, Deltona FL 32738	Fee Simple	-	149,964.00	161,759.00
Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim

Sub-Total > **149,964.00** (Total of this page)

Total > 149,964.00

0 continuation sheets attached to the Schedule of Real Property

(Report also on Summary of Schedules)

B6B (Official Form 6B) (12/07)

In re	Elizabeth Poole		(Case No	6:14-bk-07839	
_		•				
		Debtor				

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand		Cash on Hand	J	10.00
2.	Checking, savings or other financial		Checking Account with Bank of America	J	105.50
	accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Savings Account with Bank of America	J	54.50
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X			
4.	Household goods and furnishings, including audio, video, and computer equipment.		Kitchen: Dishwasher, Mircowave, Refrigerator, Stove, Washer and Dryer, Dining Table with 4 Chairs	J	500.00
			Living Room and Family Room: Chair, Coffee Table, End Table, 2 Lamps, Sofa, Stereo, Television		
			Bedrooms: 2 Beds, Computer, 2 Dressers, 2 Night Stands, TV		
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.		Misc. Books and Family Photos	-	20.00
6.	Wearing apparel.		Misc. Clothing including shoes and assessories	J	37.50
7.	Furs and jewelry.		Wedding Band	-	100.00
8.	Firearms and sports, photographic, and other hobby equipment.	X			
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.		Term Life Insurance with Bealls Department Store	-	0.00
			(Total	Sub-Total of this page)	al > 827.50

3 continuation sheets attached to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

In re	Elizabeth Poole	Case No. 6:14-bk-07839	

Debtor

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

			(**************************************		
	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
10.	Annuities. Itemize and name each issuer.	X			
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	•	401K with Bealls Inc.	W	4,250.73
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
			(To	Sub-Tota of this page)	al > 4,250.73

Sheet <u>1</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

In re	Elizabeth Poole	Case No. 6:14-bk-07839	

Debtor

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	JOHIU	or , or	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X				
22.	Patents, copyrights, and other intellectual property. Give particulars.	X				
23.	Licenses, franchises, and other general intangibles. Give particulars.	X				
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X				
25.	Automobiles, trucks, trailers, and other vehicles and accessories.	,	2004 Chevrolet Corvette V8 Coupe Vin: 1G1YY22GX45126787 Miles: 130,000	J		12,200.00
		1	2012 Harvey Davidson VIN: 1HD1MAM13CB857650 Mileage: 2,500	J		13,907.50
26.	Boats, motors, and accessories.	X				
27.	Aircraft and accessories.	X				
28.	Office equipment, furnishings, and supplies.	X				
29.	Machinery, fixtures, equipment, and supplies used in business.	X				
30.	Inventory.	X				
31.	Animals.	X				
32.	Crops - growing or harvested. Give particulars.	X				
33.	Farming equipment and implements.	X				
				Sub (Total of this p	o-Totage)	al > 26,107.50

Sheet **2** of **3** continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

	(2) (12/3) (12/3)				
In re	Elizabeth Poole			Case No. 6:14	-bk-07839
			Debtor		
		SCHED	ULE B - PERSONAL PROPER (Continuation Sheet)	RTY	
	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
34. Far	m supplies, chemicals, and feed.	X			
35. Oth not	er personal property of any kind already listed. Itemize.	X			

Sub-Total > **0.00** (Total of this page)

Total > **31,185.73**

Sheet <u>3</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

B6C (Official Form 6C) (4/13)

In re	Elizabeth Poole	,	Case No	6:14-bk-07839
		,		

Debtor

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled u (Check one box)		☐ Check if debtor claims a homestead exemption that exceeds \$155,675. (Amount subject to adjustment on 4/1/16, and every three years therea				
☐ 11 U.S.C. §522(b)(2) ☐ 11 U.S.C. §522(b)(3)			or after the date of adjustment.)			
Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption			
Real Property Location: 741 Brenchner Terrace, Deltona FL 32738	Fla. Const. art. X, § 4(a)(1); Fla. Stat. Ann. §§ 222.01 & 222.02	149,964.00	149,964.00			
<u>Cash on Hand</u> Cash on Hand	Fla. Const. art. X, § 4(a)(2)	10.00	20.00			
Checking, Savings, or Other Financial Accounts, C Checking Account with Bank of America	ertificates of Deposit Fla. Stat. Ann. § 222.16	105.50	211.00			
Savings Account with Bank of America	Fla. Stat. Ann. § 222.16	54.50	109.00			
Household Goods and Furnishings Kitchen: Dishwasher, Mircowave, Refrigerator, Stove, Washer and Dryer, Dining Table with 4 Chairs	Fla. Const. art. X, § 4(a)(2)	500.00	1,000.00			
Living Room and Family Room: Chair, Coffee Table, End Table, 2 Lamps, Sofa, Stereo, Television						
Bedrooms: 2 Beds, Computer, 2 Dressers, 2 Night Stands, TV						
Books, Pictures and Other Art Objects; Collectibles Misc. Books and Family Photos	<u>s</u> Fla. Const. art. X, § 4(a)(2)	20.00	40.00			
Wearing Apparel Misc. Clothing including shoes and assessories	Fla. Const. art. X, § 4(a)(2)	37.50	75.00			
Furs and Jewelry Wedding Band	Fla. Const. art. X, § 4(a)(2)	100.00	100.00			
Interests in IRA, ERISA, Keogh, or Other Pension of 401K with Bealls Inc.	or Profit Sharing Plans Fla. Stat. Ann. § 222.21(2)	4,250.73	4,250.73			
Automobiles, Trucks, Trailers, and Other Vehicles 2004 Chevrolet Corvette V8 Coupe Vin: 1G1YY22GX45126787 Miles: 130,000	Fla. Stat. Ann. § 222.25(1)	1,000.00	12,200.00			

Total: 156,042.23 167,969.73

B6D (Official Form 6D) (12/07)

In re	Elizabeth Poole		Case No	6:14-bk-07839
		Debtor		

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	J H M	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGEN			AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. xxxxxxxxxx9299 Bk Of Amer 4161 Piedmont Pkwy Attn: Bankruptcy Unit Greensboro, NC 27410		-	Opened 6/01/06 Last Active 6/28/14 Second Mortgage Location: 741 Brenchner Terrace, Deltona FL 32738 Value \$ 149,964.00		A T E D		39,759.00	11,795.00
Account No. Michael L Rak 201 East Pine Street Orlando, FL 32801			Representing: Bk Of Amer				Notice Only	
Account No. xxxxxx5744 Carrington Mortgage Se 1610 E Saint Andrew Place Suite B150 Attn: Bankruptcy Unit Santa Ana, CA 92705		-	Opened 3/01/05 Last Active 3/01/10 First Mortgage Location: 741 Brenchner Terrace, Deltona FL 32738 Value \$ 149,964.00				122,000.00	0.00
Account No. Michael L. Rak 201 East Pine Street Orlando, FL 32801			Representing: Carrington Mortgage Se				Notice Only	5.60
continuation sheets attached		1	(Total of		total page))	161,759.00	11,795.00

 $B6D\ (Official\ Form\ 6D)\ (12/07)$ - Cont.

In re	Elizabeth Poole	Case No. <u>6:14-bk-07839</u>
_	Debto	tor

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS (Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Hu H W		CONTINGEN	UNLIQUIDA	ΙFΙ	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. xxxxxxxxxx6530			Opened 7/01/12 Last Active 6/14/14		D A T E D			
Harley Davidson Financial Attention: Bankruptcy P.O. Box 22048 Carson City, NV 89721		-	2012 Harvey Davidson VIN: 1HD1MAM13CB857650 Mileage: 2,500					
			Value \$ 27,815.00	-	_	Н	26,253.00	0.00
Account No.								
Account No.			Value \$	_		Ш		
		_	Value \$	_	L	Ш		
Account No.			Value \$					
Account No.						П		
			Value \$					
Sheet _1 of _1 continuation sheets attack		d to		Sub			26,253.00	0.00
Schedule of Creditors Holding Secured Claims			(Total of		pag Γota	1		
			(Report on Summary of S				188,012.00	11,795.00

B6E (Official Form 6E) (4/13)

In re	Elizabeth Poole		Case No	6:14-bk-07839
		Debtor	_	

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to

priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.
■ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
☐ Domestic support obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
☐ Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of trustee or the order for relief. 11 U.S.C. § 507(a)(3).
☐ Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen
Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals
Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
☐ Taxes and certain other debts owed to governmental units
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
☐ Commitments to maintain the capital of an insured depository institution
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federa Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
☐ Claims for death or personal injury while debtor was intoxicated
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

continuation sheets attached

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6F (Official Form 6F) (12/07)

In re	Elizabeth Poole	Ca	ase No	6:14-bk-07839		
		Debtor				

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME,	С	Ηι	usband, Wife, Joint, or Community	C	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A H		ONTINGEN	LIQU	U T E	AMOUNT OF CLAIM
Account No. xxxxxxxxxxxx3791			Opened 9/01/03 Last Active 7/01/14	T	T E D		
Bank Of America Attention: Recovery Department 4161 Peidmont Pkwy. Greensboro, NC 27410		-	Credit Card		D		6,380.00
Account No. xxxxxxxxxxx3262			Opened 7/01/95 Last Active 6/26/14		$\frac{1}{1}$	<u> </u>	
Chase- Bp P.O. Box 15298 Attn: Bankruptcy Unit Wilmington, DE 19850		-	Charge Account				574.00
Account No. xxxxxxxxxxxx2709 Citibank Usa Attn: Bankruptcy Unit P.O. Box 20507 Kansas City, MO 64195		-	Opened 4/01/07 Last Active 4/02/10 Charge Account				9,942.00
Account No. xxxxxxxxxxx5135		\vdash	Opened 3/01/07 Last Active 6/02/14		+	+	3,342.00
GECRB/JC Penny Attention: Bankruptcy P.O. Box 103104 Roswell, GA 30076		-	Charge Account				491.00
_1 continuation sheets attached			(Total c	Sub f this			17,387.00

B6F (Official Form 6F) (12/07) - Cont.

In re	Elizabeth Poole		Case No	6:14-bk-07839	
_		Debtor	*		

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

				_			
CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community		U	P	
MAILING ADDRESS	CODEBTOR	н	DATE CLAIM WAS INCURRED AND	CONTINGEN	UNLIGUIDATED	DISPUTED	
INCLUDING ZIP CODE, AND ACCOUNT NUMBER	B	W	CONSIDERATION FOR CLAIM. IF CLAIM	I N	Q	Ų	AMOUNT OF CLAIM
(See instructions above.)	Ö	С	IS SUBJECT TO SETOFF, SO STATE.	Ğ	ĭ	Ė	AWOUNT OF CLAIM
,	, r	_		N	A	١	
Account No. xxxxxx5141			Opened 7/01/11	٦ [Ė		
			Factoring Company Account Citibank South		D	_	<u> </u>
Midland Funding	ı		Dakota N.A.				
8875 Aero Dr Ste 200	ı	-					
Attn: Bankruptcy Unit	ı						
San Diego, CA 92123	ı						
	ı						12,629.00
Account No. xxxxxx4701	╀	┢	Medical	+	┝	⊢	
Account No. XXXXXX4701	1		Medicai				
l., ., .	ı						
North Amerch	ı						
2810 Walker Rd	ı	-					
Attn: Bankruptcy Unit	ı						
Chattanooga, TN 37421	ı						
	ı						1,100.00
Account No. xxxxxxxxxxx1660	t		Opened 10/01/03 Last Active 6/15/14				
The same it so Andread	1		Charge Account				
Sams Club / GEMB	ı						
Attn: Bankruptcy Unit	ı	-					
P.O. Box 103104	ı						
Roswell, GA 30076	ı						
Thousand, or soors	ı						3,915.00
	┖						3,915.00
Account No.	ı						
	1						
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A ANT	╀	-		+	H		
Account No.	1						
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	ı						
	ı						
	ı						
	1						
Sheet no1 of _1 sheets attached to Schedule of		-		Subt	ota	1	
Creditors Holding Unsecured Nonpriority Claims			(Total of t				17,644.00
Creations from the Charles of the Charles			(Total of t				
					ota		
			(Report on Summary of So	chec	lule	es)	35,031.00

Case 6:14-bk-07839-CCJ Doc 16 Filed 07/31/14 Page 14 of 42

B6G (Official Form 6G) (12/07)

In re	Elizabeth Poole		Case No	6:14-bk-07839
		Debtor		

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

Case 6:14-bk-07839-CCJ Doc 16 Filed 07/31/14 Page 15 of 42

B6H (Official Form 6H) (12/07)

In re	Elizabeth Poole		Case No.	6:14-bk-07839	
-			_		
		Debtor			

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

Fill	in this information to	identify your cas	e:								
Del	btor 1	Elizabeth Po	ole			_					
_	btor 2 buse, if filing)										
Uni	ited States Bankrupto	y Court for the:	MIDDLE DISTRICT O	F FLORIDA		_					
Cas	se number 6:14	4-bk-07839					Check	if this is:			
(lf kr	nown)							amende	•		
									ent showing of the follov	g post-petitior ving date:	chapter 13
0	fficial Form	<u>B 6I</u>					MN	M / DD/ Y	YYY		
S	chedule I: \	our Inco	me								12/13
atta Par	ch a separate sheet Tt 1: Describe	to this form. O	spouse is not filing wit n the top of any additio								
1.	Fill in your emplo information.	yment		Debtor 1			ı	Debtor 2	or non-fi	ling spouse	
	If you have more th attach a separate p	ve more than one job,		ployment status Employed			☐ Emplo	•			
	information about a			☐ Not employed			ļ	■ Not e	mployed		
	employers.		Occupation	Supervisor			<u> </u>	Retired			
	Include part-time, s self-employed work		Employer's name	Bealls, Inc.							
	Occupation may inchememaker, if it ap		Employer's address	727 East 3rd Ave New Smyrna Be		. 32 ⁻	169				
			How long employed th	nere? 15 Year	s						
Par	rt 2: Give Deta	ails About Mon	thly Income								
	mate monthly incores you are separated		te you file this form. If y	ou have nothing to repo	ort for any	y line	, write \$0 i	in the spa	ace. Includ	e your non-fili	ng spouse
	ou or your non-filing sp ce, attach a separate		than one employer, comb n.	oine the information for	all emplo	oyers	for that pe	erson on	the lines be	elow. If you ne	ed more
							For Debte	or 1		btor 2 or ing spouse	
2.			, and commissions (be alculate what the monthly w		2.	\$	1,0	149.38	\$	0.00	_
3.	Estimate and list	monthly overting	ne pay.		3.	+\$		0.00	+\$	0.00	_
4.	Calculate gross Ir	ncome. Add line	e 2 + line 3.		4.	\$	1.049	9.38	\$	0.00	

Deb	tor 1	Elizabeth Poole	_	Case	number (if known)	6:14-bk-07	839	
				Eor	Debtor 1	For Debtor	2 or	
				FOI	Debtor 1	non-filing s		
	Cop	y line 4 here	4.	\$	1,049.38	\$	0.00	
				_		·		
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	246.85	\$	0.00	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	45.53	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
	5e.	Insurance	5e.	\$	6.31	\$	0.00	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	
	5g.	Union dues	5g.	\$	0.00	\$	0.00	
	5h.	Other deductions. Specify:	5h.+	\$	0.00	+ \$	0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	298.69	\$	0.00	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	750.69	\$	0.00	
8.	List	all other income regularly received:						
	8a.	Net income from rental property and from operating a business,						
		profession, or farm						
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$	0.00	\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent				-		
		regularly receive						
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	0.00	
	8d.	Unemployment compensation	8d.	\$ _	0.00	\$	0.00	
	8e.	Social Security	8e.	\$-	1,181.90	· · ·	,435.90	
	8f.	Other government assistance that you regularly receive	00.	Ψ_	1,101.90	ΨΙ	,433.30	
	0	Include cash assistance and the value (if known) of any non-cash assistance						
		that you receive, such as food stamps (benefits under the Supplemental						
		Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income	8g.	_{\$} -	0.00	\$	0.00	
	8h.	Other monthly income. Specify:	8h.+	· -		+ \$	0.00	
	011.			Ψ_	0.00	Ψ	0.00	
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,181.90	\$	1,435.90	
			Ĺ	_	·			
10.	Cald	culate monthly income. Add line 7 + line 9.	10. \$		1.932.59 + \$	1.435.90	= \$ 3.3	68.49
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			1,302.03	1,400.00	+	00.75
11		e all other regular contributions to the expenses that you list in Schedule	. —					
11.		de contributions from an unmarried partner, members of your household, your de		s. vol	ur roommates, an	d		
	othe	er friends or relatives.	•		•			
	_	not include any amounts already included in lines 2-10 or amounts that are not ava	ailable to	pay e	expenses listed in		•	
	Spe	city:				11.	+\$	0.00
12	Add	the amount in the last column of line 10 to the amount in line 11. The resu	ılt is the	comb	ined monthly inco	me		
		te that amount on the Summary of Schedules and Statistical Summary of Certain					\$ 3,3	68.49
		•					Combined	
							monthly inc	ome
13.	Do	you expect an increase or decrease within the year after you file this form?	?				•	
		No.						
		Yes Explain:						

Filli	in this informat	ion to identify yo	ur case:						
Deb	tor 1	Elizabeth F	Poole		Check	if this is:			
					☐ An	amended filing			
	Debtor 2 (Spouse, if filing)				☐ A supplement showing post-petition chapter 13 expenses as of the following date:				
(Spc	(Spouse, it minig)				exp	benses as of the follow	wing date:		
Unit	ed States Bank	ruptcy Court for	the: MIDDLE DISTRICT OF FLO	RIDA	N	MM/DD/YYYY			
	e number 6	:14-bk-07839	<u> </u>			separate filing for De intains a separate ho	btor 2 because Debtor 2 usehold	2	
Of	ficial Fo	rm B 6J							
		J: Your E	Expenses ssible. If two married people are filir					12/13	
	I: Descr Is this a joint No. Go to Yes. Does	r every question ibe Your House t case? line 2. s Debtor 2 live in		. On the top of any addition	al pages, wr	ite your name and (case number		
2.	Do you have	dependents?	■ No						
	Do not list De Debtor 2.	ebtor 1 and	☐ Yes. Fill out this information for eadependent	Dependent's relation Debtor 1 or Debtor	•	Dependent's age	Does dependent live with you?		
		he dependents'					□ No		
	names.						☐ Yes		
							□ No □ Yes		
					_		□ Yes □ No		
							☐ Yes		
							□ No		
							☐ Yes		
3.	expenses of p	enses include people other tha your dependen							
Part			ng Monthly Expenses bankruptcy filing date unless you ar	o naina thia fa	omont ! C	Shorton 12	an aut		
expe			chankruptcy ming date uniess you ar akruptcy is filed. If this is a supplemen						
	•	•	n-cash government assistance if you l it on <i>Schedule 1: Your Income</i> (Offic			Your expo	enses		
4.		r home ownersh for the ground or	ip expenses for your residence. Included	de first mortgage payments	4. \$		0.00		
	If not include	ed in line 4:							
	4a. Real e	state taxes			4a. \$		0.00		
	-	•	, or renter's insurance		4b. \$		0.00		
			pair, and upkeep expenses		4c. \$		0.00		
5			on or condominium dues	avity loops	4d. \$		0.00 457 95		
5.	- жааннопиі т	погтумуе пяуте	ous une voure resuleince, such as home e	CHILLY TORIES	7 1		//n / Uh		

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6. Vilities: 6. a. Electricity, beat, natural gas 6. b. Water, sewer, garbage collection 6. b. Water, sewer, garbage collection 6. c. Telephone, cell phone, Internet, satellite, and cable services 6. d. Other, Specify: 6. d. 5	Debtor 1	Elizabeth Poole	Case number (if known	wn) 6:14-bk-07839
Section Continuing as Section				
66. Water, sewer, garbage collection 67. \$ \$ \$ \$ \$ \$ \$ \$ \$				
6. Telephone, cell phone, Internet, satellite, and cable services 6. d. d. S. 0.00 6. Other, Specify: 6. d. S. 0.00 7. Food and bousekeeping supplies 7. S. \$ 450.00 8. Childrare and children's education costs 8. S. 0.00 9. Clothing, Laundry, and dry cleaning 9. S. 20.00 10. Personal care products and services 10. S. 10.00 11. Medical and dethat expenses 11. S. 99.00 12. Transportation. Include gas, maintenance, bus or train fare. 12. Do not include care payments. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. S. 250.00 13. Life insurance. 14. Charitable curtibutions and religious donations 15. Life insurance deducted from your pay or included in lines 4 or 20. 15. Life insurance. 15. Life insurance 15. S. 0.00 15. Life insurance. 15. Life insurance 15. S. 0.00 15. Vehicle insurance specify: 15. S. 0.00 15. Vehicle insurance 5. Specify: 15. S. 0.00 16. Taxes, Do not include taxe deducted from your pay or included in lines 4 or 20. 17. Installment or lease payments: 17. S. 0.00 17. Installment or lease payments: 17. S. 0.00 17. Corp. Specify: 17. S. 0.00 17. Other specify: 17. S. 0.00 18. Your payments for Vehicle 1 17. S. 0.00 19. Other payments for Vehicle 1 17. S. 0.00 19. Other payments for Vehicle 1 17. S. 0.00 19. Other payments of vehicle 2 17. S. 0.00 19. Other payments of vehicle 2 17. S. 0.00 19. Other payments of vehicle 2 17. S. 0.00 19. Other payments of vehicle 2 17. S. 0.00 19. Other payments of vehicle 2 17. S. 0.00 19. Other payments of vehicle 2 17. S. 0.00 20. Property, honeowore's, or renter's insurance 20. S. 0.00 20. Property, honeowore's, or renter's insurance 20. S. 0.00 20. Honeowore's association or condominium dues 20. S. 0.00 20. Honeowore's association or condominium dues 20. S. 0.00 20. Honeowore's association or condominium dues 20. S. 0.00 21. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I. Varu Income. 23a. Copy lime 12 (our combined monthly income) from Schedule 1. 23a. S. 3.3368.49 23b. Copy cur monthly expens		•		
Col. Other. Specify: 66d. \$ \$ \$ \$ \$ \$ \$ \$ \$				
7. Food and housekeeping supplies Childcare and children's education costs Childcare and children's education costs Clothing, laundry, and dry cleaning Clothing and dental expenses Clothing, laundry, and dry cleaning Clothing, laundry,			6c. \$	168.00
8. Childrare and children's education costs 10. Childrag, laundry, and dry cleaning 10. Personal care products and services 10. S 10. S 10. One disclude approach the expenses 10. S 11. S 12. S 13. S 14. S 15. S 16. S 16. S 17. Transportation. Include gas, maintenance, bus or train faire. Do not include car payments. 12. S 13. S 25. 00 14. Charitable contributions and religious donations 14. S 15. S 16. S 16. S 17. S 18. S 18. S 19. One 19. One of include insurance educted from your pay or included in lines 4 or 20. 15. List insurance 15. Health insurance 15. Lear trainment, clubs, recreation, newspapers, magazines, and books 15. Lear trainment, clubs, recreation, newspapers, magazines, and books 15. Lear trainment, clubs, recreation, newspapers, magazines, and books 16. Taxes. 17. Loop not include insurance educted from your pay or included in lines 4 or 20. 15. Lear trainment educted from your pay or included in lines 4 or 20. 15. Lear trainment educted from your pay or included in lines 4 or 20. 15. Lear payments or Vehicle 1 17. Lorans, Do not include taxes deducted from your pay or included in lines 4 or 20. 17. Installment or lease payments: 17. Lar Car payments for Vehicle 2 17. Lar Car payments for Vehicle 3 17. Lar Car payments for Vehicle 4 17. Lar Car payments for Vehicle 5 17. Lar Car payments for Vehicle 6 17. Lar Car payments for Vehicle 7 17. Lar Car payments for Vehicle 7 17. Lar Car payments for Vehicle 7 17. Lar Car payments for Vehicle 8 17. Lar Car payments for Vehicle 9 17. Lar Car payments for Vehicle 1 17. Lar Car payments for Vehicle 9 17. Lar Car payments for Vehicle 9 17. Lar Car payments for Vehicle 9 17. Lar Car	6d.	Other. Specify:	6d. \$	0.00
10. Personal care products and services 10. \$ 10.00	7. Foo	d and housekeeping supplies	7. \$	450.00
10. Personal care products and services	8. Chil	dcare and children's education costs	8. \$	0.00
11. Medical and dental expenses 11. \$ 99.00	9. Clot	hing, laundry, and dry cleaning	9. \$	20.00
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. S 200.00	10. Pers	onal care products and services	10. \$	10.00
12. Transportation. Include gas, maintenance, bus or train fare. 12. \$ 200.00 13. Eletertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 25.00 14. Charitable contributions and religious donations 14. \$ 0.00 15. Insurance. 15. Insurance 15. Insurance 15. \$ 0.00 15. Veitice insurance 15. \$ 0.00 16. Taxes 10. not include taxes deducted from your pay or included in lines 4 or 20. \$ 0.00 15. Veitice 15. \$ 0.00 16. Taxes 17. \$ 0.00 17. Installment or lease payments 17. \$ 0.00 17. Installment or lease payments 17. \$ 0.00 17. Other, Specify: 17. \$ 0.00 17. Other, Specify: 17. \$ 0.00 17. Other, Specify: 17. \$ 0.00 18. Vour payments for Vehicle 2 17. \$ 0.00 19. Other payments for Vehicle 2 17. \$ 0.00 19. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line \$\$, Schedule I, Your Income (Official Form 61). \$ 0.00 19. Other payments on the \$\$, Schedule I, Your Income (Official Form 62). \$ 0.00 20. Worgages on other property 20. \$ 0.00 20. Worgages o	11. Med	lical and dental expenses	11. \$	99.00
Do not include car payments. 12. \$ \$ \$ \$ \$ \$ \$ \$ \$	12. Tra	asportation. Include gas, maintenance, bus or train fare.		
14. Charitable contributions and religious donations			12. \$	200.00
15. Insurance.	13. Ent	ertainment, clubs, recreation, newspapers, magazines, and books	13. \$	25.00
Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. \$ 0.00 15b. Health insurance 15b. \$ 0.00 15c. Vehicle insurance. Specify 15c. \$ 0.00 15d. Other insurance. Specify 15c. \$ 0.00 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15g. Specify 16a. \$ 0.00 17a. Car payments for Vehicle 1 17a. \$ 0.00 17b. Car payments for Vehicle 2 17b. \$ 0.00 17c. Other. Specify 17c. \$ 0.00 17d. Other. Specify 17c. \$ 0.00 18	14. Cha	ritable contributions and religious donations	14. \$	0.00
15a 15a 15a 15b	15. Insu	rance.		
15b. Health insurance 15b. \$ 0.00 15c. Vehicle insurance 15c. \$ 274.00 15d. \$ 0.00 15d. \$ 0.0	Dor	ot include insurance deducted from your pay or included in lines 4 or 20.		
15c. Vehicle insurance. 15d. Other insurance. Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. S 0.00 17 Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. S 0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 61). 18 Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 61). 19 Other payments you make to support others who do not live with you. Specify: 19. 20. Mortgages on other property 20a. S 0.00 20b. Real estate taxes 20c. S 0.00 20c. Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses 20d. S 0.00 21 Other: Specify: 21 + s 0.00 22 Your monthly expenses. Add lines 4 through 21. 23 Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. S 3,368.49 23b. Copy your monthly expenses from line 22 above. 23c. Subtract your monthly expenses from line 22 above. 23c. Subtract your monthly expenses from line 22 above. 23c. Subtract your monthly expenses from line 22 above. 23c. Subtract your monthly expenses from line 22 above. 23c. Subtract your monthly expenses from line 22 above. 23c. Subtract your monthly expenses from line 22 above. 23c. Subtract your monthly expenses from line 22 above. 23c. Subtract your monthly expenses from line 22 above. 23c. The result is your monthly expenses from line 22 above.	15a.	Life insurance	15a. \$	0.00
15d. Other insurance. Specify: 15d. S	15b.	Health insurance	15b. \$	0.00
15d. Other insurance. Specify: 15d. Saxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 15d. Specify: 16d. S 17a. Car payments for Vehicle 1 17a. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. Other. Specify: 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 61). 19. Other payments you make to support others who do not live with you. Specify: 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. S 20d. Homeowner's association or condominium dues 20d. Homeowner's association or condominium dues 20d. What income, repair, and upkeep expenses. 21. Other: Specify: 22. Your monthly expenses. Add lines 4 through 21. The result is your monthly expenses. 23. Calculate your monthly expenses. 24. Copy line 12 (your combined monthly income) from Schedule I. 25a. Cubtract your monthly expenses from your monthly income. 27a. Subtract your monthly expenses from your monthly income. 27a. Subtract your monthly expenses from your monthly income. 27a. Subtract your monthly expenses from your monthly income. 27a. Subtract your monthly expenses from your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year of do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? ■ No.	15c.	Vehicle insurance	15c. \$	274.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17a. Car payments for Vehicle 1 17a. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. S 0.00 17d. Other. Specify: 17d. S 0.00 17d. Other. Specify: 17d. S 0.00 17d. Other spayments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5. Schedule 1, Your Income (Official Form 61). 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5. Schedule 1, Your Income (Official Form 61). 19. Other payments you make to support others who do not live with you. 20a. Mortgages on other property 20a. S 20a. Mortgages on other property 20b. S 0.00 20d. Maintenance, repair, and upkeep expenses 20d. S 20c. Property, homeowner's, or renter's insurance 20e. S 20e. Homeowner's association or condominium dues 20e. S 20e. Homeowner's association or condominium dues 20e. S 20e. Homeowner's association or condominium dues 20e. S 21. Other: Specify: 22. Your monthly expenses. 23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. Subtract your monthly expenses from your monthly income. 23c. Subtract your monthly expenses from your monthly income. 13b. S 23c. Subtract your monthly net income. 23c. Subtract your monthly per lines or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year of do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage payment to increase or decrease because of a modification to the terms of your mortgage payment to increase or decrease because of a modification to the terms of your mortgage payment to increase or	15d.	Other insurance. Specify:	15d. \$	
Specify:	16. Tax	es. Do not include taxes deducted from your pay or included in lines 4 or 20.		
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B6 Declaration (Official Form 6 - Declaration). (12/07)

United States Bankruptcy CourtMiddle District of Florida

In re	Elizabeth Poole			Case No.	6:14-bk-07839	
			Debtor(s)	Chapter	13	
	DECLARATION C DECLARATION UNDER 1			_		
	I declare under penalty of perjury the sheets, and that they are true and co					
Date	July 22, 2014	Signature	/s/ Elizabeth Poole Elizabeth Poole Debtor			

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

United States Bankruptcy Court Middle District of Florida

In re	Elizabeth Poole		Case No.	6:14-bk-07839
		Debtor(s)	Chapter	13

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT \$34,765.35	SOURCE 2013: Wife Employment Income
\$32,421.61	2012: Wife Employment Income
\$18,744.75	2014 YTD: Wife Employment Income

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$10,531.30 2014 YTD: Husband Social Security \$17,230.08 2013: Husband Social Security \$17,230.08 2012: Husband Social Security \$8,273.30 2014 YTD: Wife Social Security \$4,727.60 2013: Wife Social Security

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS
OF CREDITOR
Harley Davidson Financial
Attention: Bankruptcy
Po Box 22048
Carson City, NV 89721

DATES OF PAYMENTS **May, June, July**

AMOUNT PAID **\$1.848.00**

AMOUNT STILL OWING \$26,253.00

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATES OF PAYMENTS/ TRANSFERS AMOUNT
PAID OR
VALUE OF
TRANSFERS
AMOUNT STILL
OWING

NAME AND ADDRESS OF CREDITOR

None

c. All debtors: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER **CHRISTINA TRUST**

PROCEEDING CIVIL

NATURE OF

COURT OR AGENCY AND LOCATION

STATUS OR DISPOSITION

FJ

V. **ELIZABETH A. POOLE** IN THE CIRCUIT COURT OF THE SEVENTH JUDICIAL CIRCUIT.

IN AND FOR VOLUSIA COUNTY,

FLORIDA

CASE NO.: 2011-CC-12526 CIDL

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE

BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF

PROPERTY

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER

DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF **PROPERTY**

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN

NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER

DESCRIPTION AND VALUE OF

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None П

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

Price Law Firm 390 Maitland Avenue **Suite 1000** Altamonte Springs, FL 32701

DATE OF PAYMENT. NAME OF PAYER IF OTHER THAN DEBTOR 7/9/14

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY \$1,900.00 includes credit counseling, credit report, and filing fee

10. Other transfers

None

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE

DATE(S) OF TRANSFER(S)

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF NOTICE

ENVIRONMENTAL LAW

6

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF NOTICE

ENVIRONMENTAL

LAW

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

> LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO.

(ITIN)/ COMPLETE EIN ADDRESS

NATURE OF BUSINESS

BEGINNING AND

ENDING DATES

None

NAME

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

b. List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

ADDRESS NAME

DATES SERVICES RENDERED

7

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

None d. List

d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS

DATE ISSUED

20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

DATE OF INVENTORY

21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME

None

ADDRESS

DATE OF WITHDRAWAL

b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within one year

immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

8

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

* * * * * *

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	July 22, 2014	Signature	/s/ Elizabeth Poole
		_	Elizabeth Poole
			Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

UNITED STATES BANKRUPTCY COURT MIDDLE DISTRICT OF FLORIDA

NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments

over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

B 201B (Form 201B) (12/09)

United States Bankruptcy CourtMiddle District of Florida

	Middle District of Florida						
In re Elizabeth Poole		Case No.	6:14-bk-07839				
	Debtor(s)	Chapter	13				
CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE Certification of Debtor I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.							
Elizabeth Poole	X /s/ Elizabeth Po	oole	July 22, 2014				
Printed Name(s) of Debtor(s)	Signature of De	ebtor	Date				
Case No. (if known) 6:14-bk-07839	X						
	Signature of Ioi	nt Debtor (if any)	Date				

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

United States Bankruptcy Court Middle District of Florida

In re	Elizabeth Poole		Case No.	6:14-bk-07839	
		Debtor(s)	Chapter	13	
	VERIFIC	CATION OF CREDITOR	MATRIX		
Γhe ab	ove-named Debtor hereby verifies that the	ne attached list of creditors is true and	correct to the bes	t of his/her knowledge.	

/s/ Elizabeth Poole
Elizabeth Poole
Signature of Debtor

Date: July 22, 2014

United States Bankruptcy Court Middle District of Florida

In r	re Elizabeth Poole	Case No.	6:14-bk-07839
	Debtor(s)	Chapter	13
	DISCLOSURE OF COMPENSATION OF ATTOR	NEY FOR DE	CBTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the atto compensation paid to me within one year before the filing of the petition in bankruptcy, be rendered on behalf of the debtor(s) in contemplation of or in connection with the bank	or agreed to be paid	d to me, for services rendered or to
	For legal services, I have agreed to accept	\$	1,900.00
	Prior to the filing of this statement I have received	\$	1,900.00
	Balance Due	\$	0.00
2.	The source of the compensation paid to me was:		
	■ Debtor □ Other (specify):		
3.	The source of compensation to be paid to me is:		
	■ Debtor □ Other (specify):		
4.	■ I have not agreed to share the above-disclosed compensation with any other person u firm.	unless they are men	nbers and associates of my law
	☐ I have agreed to share the above-disclosed compensation with a person or persons w copy of the agreement, together with a list of the names of the people sharing in the		
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects	s of the bankruptcy	case, including:
	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in dete b. Preparation and filing of any petition, schedules, statement of affairs and plan which c. Representation of the debtor at the meeting of creditors and confirmation hearing, an d. [Other provisions as needed] \$1500 mediation fee, if applicable, \$50 monitoring fee after the seven 	may be required; d any adjourned he	arings thereof;
6.	By agreement with the debtor(s), the above-disclosed fee does not include the following	service:	
	CERTIFICATION		
this	I certify that the foregoing is a complete statement of any agreement or arrangement for a sharkruptcy proceeding.	payment to me for	representation of the debtor(s) in
Date	red: July 22, 2014 /s/ Charles W. Pric	:e	
	Charles W. Price 0 Price Law Firm 390 Maitland Aven		

Suite 1000

Altamonte Springs, FL 32701 407-834-0090 Fax: 407-386-7610 cpricelaw@gmail.com

Case 6:14-bk-07839-CCJ Doc 16 Filed 07/31/14 Page 34 of 42

B 22C (Official Form 22C) (Chapter 13) (04/13)

In re Eliza	beth Poole	According to the calculations required by this statement:
	Debtor(s)	■ The applicable commitment period is 3 years.
Case Number:		☐ The applicable commitment period is 5 years.
	(If known)	☐ Disposable income is determined under § 1325(b)(3).
		■ Disposable income is not determined under § 1325(b)(3).
		(Check the boxes as directed in Lines 17 and 23 of this statement.)

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

	Part I. REPORT OF INCOME	2					
1	Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed. a. □ Unmarried. Complete only Column A ("Debtor's Income") for Lines 2-10.						
	b. Married. Complete both Column A ("Debtor's Income") and Column I	B ("Spouse's Inco	ome'	'') for Lines 2-	10.		
	All figures must reflect average monthly income received from all sources, deriv			Column A		Column B	
	six calendar months prior to filing the bankruptcy case, ending on the last day of before the filing. If the amount of monthly income varied during the six months divide the six-month total by six, and enter the result on the appropriate line.			Debtor's Income		Spouse's Income	
2	Gross wages, salary, tips, bonuses, overtime, commissions.		\$	1,409.38	\$	0.00	
3	Income from the operation of a business, profession, or farm. Subtract Line and enter the difference in the appropriate column(s) of Line 3. If you operate m business, profession or farm, enter aggregate numbers and provide details on an not enter a number less than zero. Do not include any part of the business ex on Line b as a deduction in Part IV.	nore than one attachment. Do					
	a. Gross receipts \$ 0.00 \$	0.00					
	b. Ordinary and necessary business expenses \$ 0.00 \$	0.00					
	c. Business income Subtract Line b from Line a		\$	0.00	\$	0.00	
4	Rents and other real property income. Subtract Line b from Line a and enter in the appropriate column(s) of Line 4. Do not enter a number less than zero. I any part of the operating expenses entered on Line b as a deduction in Part Debtor	Do not include t IV. Spouse					
	a. Gross receipts \$ 0.00 \$	0.00					
	b. Ordinary and necessary operating expenses \$ 0.00 \$	0.00	ф	0.00	Φ.	0.00	
	c. Rent and other real property income Subtract Line b from Line a	l	\$	0.00	\$	0.00	
5	Interest, dividends, and royalties.		\$	0.00	\$	0.00	
6	Pension and retirement income.		\$	0.00	\$	0.00	
7	Any amounts paid by another person or entity, on a regular basis, for the hexpenses of the debtor or the debtor's dependents, including child support purpose. Do not include alimony or separate maintenance payments or amount debtor's spouse. Each regular payment should be reported in only one column; if listed in Column A, do not report that payment in Column B.	paid for that s paid by the	\$	0.00	\$	0.00	
8	Unemployment compensation. Enter the amount in the appropriate column(s) However, if you contend that unemployment compensation received by you or you benefit under the Social Security Act, do not list the amount of such compensation or B, but instead state the amount in the space below:	our spouse was a					
	Unemployment compensation claimed to be a benefit under the Social Security Act Debtor \$ 0.00 Spouse \$	0.00	\$	0.00	\$	0.00	

9	international or domestic terrorism.					
	Debtor Spouse					
	a.	\$ 0.0	0 \$	0.00		
10	Subtotal. Add Lines 2 thru 9 in Column A, and, if Column B is completed, add Lines 2 through	\$ 1,409.3		0.00		
11	Total. If Column B has been completed, add Line 10, Column A to Line 10, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 10, Column A.	\$		1,409.38		
	Part II. CALCULATION OF § 1325(b)(4) COMMITMENT P	ERIOD				
12	Enter the amount from Line 11		\$	1,409.38		
13	Marital Adjustment. If you are married, but are not filing jointly with your spouse, AND if you co calculation of the commitment period under § 1325(b)(4) does not require inclusion of the income enter on Line 13 the amount of the income listed in Line 10, Column B that was NOT paid on a rethe household expenses of you or your dependents and specify, in the lines below, the basis for excincome (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list addited adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero. a. \$ \$ b. \$ \$ c. \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	of your spouse, gular basis for cluding this the debtor or itional				
	Total and enter on Line 13		\$	0.00		
14	Subtract Line 13 from Line 12 and enter the result.		\$	1,409.38		
15	Annualized current monthly income for $\ 1325(b)(4)$. Multiply the amount from Line 14 by the and enter the result.	number 12	\$	16,912.56		
16	Applicable median family income. Enter the median family income for applicable state and hous (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankru a. Enter debtor's state of residence: FL b. Enter debtor's household size:		¢.	F2 F09 00		
	<u> </u>		\$	52,598.00		
17	 Application of § 1325(b)(4). Check the applicable box and proceed as directed. ■ The amount on Line 15 is less than the amount on Line 16. Check the box for "The applicable commitment period the top of page 1 of this statement and continue with this statement. □ The amount on Line 15 is not less than the amount on Line 16. Check the box for "The applicable commitment years" at the top of page 1 of this statement and continue with this statement. 					
	Part III. APPLICATION OF § 1325(b)(3) FOR DETERMINING DISPOSABL	LE INCOME				
18	Enter the amount from Line 11.		\$	1,409.38		
19	Marital Adjustment. If you are married, but are not filing jointly with your spouse, enter on Line any income listed in Line 10, Column B that was NOT paid on a regular basis for the household exdebtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the dependents) and the amount of income devoted to each purpose. If necessary, list additional adjust separate page. If the conditions for entering this adjustment do not apply, enter zero. a.	rpenses of the income(such he debtor's				
	Total and enter on Line 19.		\$	0.00		
20	Current monthly income for § 1325(b)(3). Subtract Line 19 from Line 18 and enter the result.		\$	1,409.38		

B 22C (Official Form 22C) (Chapter 13) (04/13)

24A 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Applic The 132 The § 12 Nation Enter in applica bankruj exempt Nation Out-of-Out-of-www.u	Pocket Health Care for persons under 65 years of Pocket Health Care for persons 65 years of age sdoj.gov/ust/ or from the clerk of the bankruptey	on Line on Line on Line on Comp unt on and cor OF L andarc sekeep al Stand allable a the nur number low the of age, a or older	roceed as directed. e 22. Check the box for "I plete the remaining parts of Line 22. Check the box for mplete Part VII of this state. DEDUCTIONS FROM the Internal Reveals of the Internal Reveals for Allowable Living at www.usdoj.gov/ust/ or fimber that would currently rof any additional dependent amount from IRS National and in Line a2 the IRS National (This information is available).	f this statement. or "Disposable income is rement. Do not complete I OM INCOME nue Service (IRS) re, and miscellaneous. g Expenses for the rom the clerk of the be allowed as ents whom you support. I Standards for ional Standards for lable at	not dete	ermined under
24A 24B 3	Nation Enter in applica bankruj exempt Nation Out-of-Out-of-www.u	amount on Line 21 is more than the amount 5(b)(3)" at the top of page 1 of this statement at amount on Line 21 is not more than the amo 325(b)(3)" at the top of page 1 of this statement Part IV. CALCULATION Subpart A: Deductions under State al Standards: food, apparel and services, hour Line 24A the "Total" amount from IRS Nation ble number of persons. (This information is avapted your court.) The applicable number of persons is ions on your federal income tax return, plus the al Standards: health care. Enter in Line a1 be Pocket Health Care for persons under 65 years of age stoj.gov/ust/ or from the clerk of the bankrupted	on Line and compunt on and correct of the andard as the number of age, a correct of the age, and a correct of the age, a correct of the age, a correct of the age, and a correct of the age, a correct of the age, and a correct of the age, a	e 22. Check the box for "I plete the remaining parts of Line 22. Check the box for mplete Part VII of this state DEDUCTIONS FROM the Internal Revelopment of the Internal Revelopment of the Internal Revelopment (I www.usdoj.gov/ust/ or from the Internal Revelopment (I www.usdoj.gov/ust/ or from the Internal Revelopment (I www.usdoj.gov/ust/ or from Internal Reve	f this statement. or "Disposable income is rement. Do not complete I OM INCOME nue Service (IRS) re, and miscellaneous. g Expenses for the rom the clerk of the be allowed as ents whom you support. I Standards for ional Standards for lable at	not dete	ermined under
24A 24B 1	Nation Enter in applica bankru exempt Nation Out-of- Out-of- www.u	Part IV. CALCULATION Subpart A: Deductions under Standards: food, apparel and services, hour Line 24A the "Total" amount from IRS Nation ble number of persons. (This information is avapted court.) The applicable number of persons is ions on your federal income tax return, plus the al Standards: health care. Enter in Line al be Pocket Health Care for persons under 65 years of Pocket Health Care for persons 65 years of age stoj.gov/ust/ or from the clerk of the bankruptey	of I	ds of the Internal Reve ing supplies, personal cand dards for Allowable Living at www.usdoj.gov/ust/ or fimber that would currently r of any additional dependent amount from IRS National and in Line a2 the IRS Nation. (This information is available)	om Income nue Service (IRS) re, and miscellaneous. g Expenses for the rom the clerk of the be allowed as ents whom you support. I Standards for ional Standards for lable at		
24A 24B 1	Enter in applica bankruj exempt Nation Out-of- Out-of- www.u	al Standards: food, apparel and services, hount Line 24A the "Total" amount from IRS Nation ble number of persons. (This information is avapted court.) The applicable number of persons is ions on your federal income tax return, plus the al Standards: health care. Enter in Line al be Pocket Health Care for persons under 65 years of Pocket Health Care for persons 65 years of age sdoj.gov/ust/ or from the clerk of the bankrupted	al Standailable as the number low the of age, a or older	ing supplies, personal candards for Allowable Living at www.usdoj.gov/ust/ or fimber that would currently r of any additional dependent amount from IRS National and in Line a2 the IRS Nation (This information is avai	re, and miscellaneous. g Expenses for the rom the clerk of the be allowed as ents whom you support. 1 Standards for ional Standards for lable at	\$	
24A 24B 1	Enter in applica bankruj exempt Nation Out-of- Out-of- www.u	In Line 24A the "Total" amount from IRS Nation ble number of persons. (This information is avapted court.) The applicable number of persons is ions on your federal income tax return, plus the al Standards: health care. Enter in Line al be Pocket Health Care for persons under 65 years of Pocket Health Care for persons 65 years of age sdoj.gov/ust/ or from the clerk of the bankrupted	al Standailable as the number number low the of age, a or older	dards for Allowable Living at www.usdoj.gov/ust/ or fromber that would currently r of any additional dependent amount from IRS National and in Line a2 the IRS Nation. (This information is avairable.)	g Expenses for the from the clerk of the be allowed as ents whom you support. 1 Standards for ional Standards for lable at	\$	
24B	Out-of- Out-of- www.u	Pocket Health Care for persons under 65 years of Pocket Health Care for persons 65 years of age sdoj.gov/ust/ or from the clerk of the bankruptey	of age, a or older	and in Line a2 the IRS Nat r. (This information is avai	ional Standards for lable at		
	National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.) Multiply Line a1 by Line b1 to obtain a total amount for persons under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for persons 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 24B.						
	Person	ns under 65 years of age	Pers	sons 65 years of age or old	der		
	a1. Allowance per person a2. Allowance per person						
	b1.	Number of persons	b2.	Number of persons			
	c1.	Subtotal	c2.	Subtotal		\$	
25A 1	Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court). The applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.				\$		
25B	Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court) (the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 47; subtract Line b from Line a and enter the result in Line 25B. Do not enter an amount less than zero.						
1 1		IRS Housing and Utilities Standards; mortgage/ Average Monthly Payment for any debts secured					
],		home, if any, as stated in Line 47	. <i>5</i> y you	\$			
						\$	
2	c. Net mortgage/rental expense Subtract Line b from Line a. Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 25A and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities						

27A	Local Standards: transportation; vehicle operation/public transpexpense allowance in this category regardless of whether you pay the regardless of whether you use public transportation. Check the number of vehicles for which you pay the operating expension included as a contribution to your household expenses in Line 7. If you checked 0, enter on Line 27A the "Public Transportation" amo Transportation. If you checked 1 or 2 or more, enter on Line 27A the Standards: Transportation for the applicable number of vehicles in the Standards: Transportation for the applicable number of vehicles in the Standards: Transportation for the applicable number of vehicles in the Standards: Transportation for the applicable number of vehicles in the Standards: Transportation for the applicable number of vehicles in the Standards.					
	Standards: Transportation for the applicable number of vehicles in th Census Region. (These amounts are available at www.usdoj.gov/ust/		\$			
27B	Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 27B the "Public Transportation" amount from the IRS Local Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)					
	Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) $\Box 1 \Box 2$ or more.					
28	Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy Average Monthly Payments for any debts secured by Vehicle 1, as stand enter the result in Line 28. Do not enter an amount less than 2					
	a. IRS Transportation Standards, Ownership Costs	\$				
	Average Monthly Payment for any debts secured by Vehicle b. 1, as stated in Line 47	\$				
	c. Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.	\$			
29	Local Standards: transportation ownership/lease expense; Vehic the "2 or more" Box in Line 28. Enter, in Line a below, the "Ownership Costs" for "One Car" from th (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy Average Monthly Payments for any debts secured by Vehicle 2, as stand enter the result in Line 29. Do not enter an amount less than a					
	a. IRS Transportation Standards, Ownership Costs					
	b. Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47	\$				
	c. Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.	\$			
30	Other Necessary Expenses: taxes. Enter the total average monthly federal, state, and local taxes, other than real estate and sales taxes, social security taxes, and Medicare taxes. Do not include real estate	such as income taxes, self employment taxes,	\$			
31	Other Necessary Expenses: involuntary deductions for employment deductions that are required for your employment, such as mandatory uniform costs. Do not include discretionary amounts, such as voluntary deductions for employment are required for your employment, such as mandatory uniform costs.	retirement contributions, union dues, and	\$			
32	Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.					
33	Other Necessary Expenses: court-ordered payments. Enter the to pay pursuant to the order of a court or administrative agency, such as include payments on past due obligations included in line 49.		\$			
34	Other Necessary Expenses: education for employment or for a pl Enter the total average monthly amount that you actually expend for and for education that is required for a physically or mentally challen education providing similar services is available.	education that is a condition of employment	\$			
35	Other Necessary Expenses: childcare. Enter the total average mor childcare - such as baby-sitting, day care, nursery and preschool. Do		\$			

B 22C (Official Form 22C) (Chapter 13) (04/13)

36	Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 24B. Do not include payments for health insurance or health savings accounts listed in Line 39.	\$		
37	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you			
38	Total Expenses Allowed under IRS Standards. Enter the total of Lines 24 through 37.	\$		
	Subpart B: Additional Living Expense Deductions			
	Note: Do not include any expenses that you have listed in Lines 24-37			
	Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.			
39	a. Health Insurance \$			
	b. Disability Insurance \$			
	c. Health Savings Account \$			
	Total and enter on Line 39	\$		
	If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below:			
40	Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34.			
41	Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incur to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.			
42	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.	\$		
43	Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$156.25 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.	\$		
44	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.			
45	Charitable contributions. Enter the amount reasonably necessary for you to expend each month on charitable contributions in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2). Do not include any amount in excess of 15% of your gross monthly income.	\$		
46	Total Additional Expense Deductions under § 707(b). Enter the total of Lines 39 through 45.	\$		

		Subpart C: Deductions for De	bt Payment				
47	Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amount scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 47.						
	Name of Creditor	Property Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance □yes □no			
	a.		Total: Add Lines		\$		
Other payments on secured claims. If any of debts listed in Line 47 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 47, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page. Name of Creditor Property Securing the Debt 1/60th of the Cure Amount							
	a.		\$	Total: Add Lines	\$		
50	Do not include current obligations, such as those set out in Line 33. Chapter 13 administrative expenses. Multiply the amount in Line a by the amount in Line b, and enter the resulting administrative expense. a. Projected average monthly Chapter 13 plan payment.						
51	Total Deductions for Debt Payme	ent. Enter the total of Lines 47 through	50.		\$		
		Subpart D: Total Deductions f	rom Income				
52	Total of all deductions from incompared to the second seco	ne. Enter the total of Lines 38, 46, and	51.		\$		
	Part V. DETERMINATION OF DISPOSABLE INCOME UNDER § 1325(b)(2)						
53	Total current monthly income. E	inter the amount from Line 20.			\$		
54		ly average of any child support payment corted in Part I, that you received in accordance of the control of the			y \$		
55		Enter the monthly total of (a) all amound retirement plans, as specified in § 541 pecified in § 362(b)(19).			\$		
56	Total of all deductions allowed un	nder § 707(b)(2). Enter the amount from	m Line 52.		\$		

	Deduction for special circumstances. If there are special which there is no reasonable alternative, describe the special a-c below. If necessary, list additional entries on a separate 57. You must provide your case trustee with documenta detailed explanation of the special circumstances that m			
57	Nature of special circumstances	Amount of Expense]	
	a.	\$]	
	b.	\$	1	
	c.	\$	4	
		Total: Add Lines	\$	
58	Total adjustments to determine disposable income. Add the result.	the amounts on Lines 54, 55, 56, and 57 and enter	\$	
59	Monthly Disposable Income Under § 1325(b)(2). Subtract Line 58 from Line 53 and enter the result.			
	Part VI. ADDITION	NAL EXPENSE CLAIMS		
	not otherwise stated in this form, that are required for be an additional deduction from your current monthly a separate page. All figures should reflect your average	income under §		
60	Expense Description	Monthly Amount]	
	a.	\$]	
	b.	\$	1	
	C.	\$ \$	-	
	d. Total: Add Lin	nes a, b, c and d \$	-	
		VERIFICATION		
61	I declare under penalty of perjury that the information providebtors must sign.) Date: July 22, 2014		oint case, both	

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 01/01/2014 to 06/30/2014.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **Employment**

Income by Month:

6 Months Ago:	01/2014	\$1,409.38
5 Months Ago:	02/2014	\$1,409.38
4 Months Ago:	03/2014	\$1,409.38
3 Months Ago:	04/2014	\$1,409.38
2 Months Ago:	05/2014	\$1,409.38
Last Month:	06/2014	\$1,409.38
_	Average per month:	\$1,409.38

Non-CMI - Social Security Act Income

Source of Income: Social Security

Income by Month:

111001110 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
6 Months Ago:	01/2014	\$1,181.90
5 Months Ago:	02/2014	\$1,181.90
4 Months Ago:	03/2014	\$1,181.90
3 Months Ago:	04/2014	\$1,181.90
2 Months Ago:	05/2014	\$1,181.90
Last Month:	06/2014	\$1,181.90
	Average per	\$1,181.90
	month:	

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period **01/01/2014** to **06/30/2014**.

Non-CMI - Social Security Act Income

Source of Income: Social Security

Income by Month:

6 Months Ago:	01/2014	\$1,435.90
5 Months Ago:	02/2014	\$1,435.90
4 Months Ago:	03/2014	\$1,435.90
3 Months Ago:	04/2014	\$1,435.90
2 Months Ago:	05/2014	\$1,435.90
Last Month:	06/2014	\$1,435.90
_	Average per	\$1,435.90
	month:	